


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 14, 2005 8:00 am
Secretary of State

03-14-2005 90088 027 ***150.00

DOCUMENT # G11215 1. Entity Name BRENDON & ELLA, INC.					
Principal Place of Business 2327 NW 13TH ST. GAINESVILLE, FL 33609			Mailing Address 2327 NW 13TH ST. GAINESVILLE, FL 33609		
2. Principal Place of Business 2327 NW 13th St Suite, Apt. #, etc.		3. Mailing Address 2327 NW 13th St Suite, Apt. #, etc.			
City & State Gainesville, FL Zip 32609 Country		City & State Gainesville, FL Zip 32609 Country		4. FEI Number 59-2237305	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent SPELMAN, WALTER 1667 NW 16TH PLACE GAINESVILLE, FL 32607			7. Name and Address of New Registered Agent Name Spelman, Walter Street Address (P.O. Box Number is Not Acceptable) 6617 NW 16th Place City Gainesville FL Zip Code 32605		
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE <u><i>Walt Spelman</i></u> Walt Spelman, President 3/7/05 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PST SPELMAN, WALTER 2327 NW 13TH ST. GAINESVILLE, FL <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u><i>Walt Spelman</i></u> Walt Spelman, President 3/7/05 (352)376-6224 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					